MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL N___

10/525439

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1				/		
2				/		
3				/		
4				/		
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8				/		
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TOTAL IND.		⇩	5	⇩		⇩
TOTAL DEP.		⇦	24	⇦		⇦
TOTAL CLAIMS			29			

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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52				/		
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100						
TOTAL IND.		⇩		⇩		⇩
TOTAL DEP.		⇦		⇦		⇦
TOTAL CLAIMS						

PTO-1360

U.S. DEPARTMENT of COMMERCE